



CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Box: Amendment
Commissioner for Patents
Washington, D.C. 20231**

on Sept 14, 2004

Anne Antonoff
Anne Antonoff

RECEIVED

SEP 20 2004

Technology Center 2600

In Re Application of:

Jayant, et al.

Group Art Unit: 2613

Serial No.: 09/975,480

Examiner: An, Shawn S.

Filed: June 6, 2001

Docket No.: 062004-1770

For: SYSTEM AND METHOD FOR OBJECT-ORIENTED VIDEO PROCESSING

The following is a list of documents enclosed:

Amendment Transmittal Letter;
Amendment and Response to Final Office Action; and
Return Postcard

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

AMENDMENT TRANSMITTAL LETTER (SMALL)

Applicant(s): Jayant, et al.

Docket No.

62004-1770

Serial No.
09/875,480

Filing Date
June 6, 2004

Examiner
An, Shawn S.

Confirmation No.
7949

Group Art Unit
2613

Invention: **SYSTEM AND METHOD FOR OBJECT-ORIENTED VIDEO PROCESSING**

Commissioner for Patents
Mail Stop Amendment
P.O. Box 1450
Alexandria VA 22313-1450

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SEP 20 2004

Technology Center 2600

Transmitted herewith is Response and Amendment Final Office Action in the above-identified application.

The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED

| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
|--|---|--|--|--|-------------------|
| TOTAL CLAIMS | 46 - | 55 = | 0 | X \$9.00 | \$0 |
| INDEP. CLAIMS | 8 - | 8 = | 0 | X \$43.00 | \$0 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$145.00 |
| EXTENSION FEE | 1 ST MONTH <input type="checkbox"/> 55.00 | 2 ND MONTH <input type="checkbox"/> 210.00 | 3 RD MONTH <input type="checkbox"/> 475.00 | 4 TH MONTH <input type="checkbox"/> 740.00 | \$ |
| Other Fees: | | | | | \$ |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0 |

- ☒ No additional fee is required for the type of document.
- ☐ Please charge Deposit Account No. _____ in the amount of _____.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed.
- ☐ A Credit Card Payment Form PTO-2038 is attached in the amount of \$ _____.
- ☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778. A duplicate copy of this page is enclosed.

Scott A. Horstemeier, Reg. No. 34,183

Date

09/14/04